

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL041031</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/25/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>PULLIAM FAMILY CARE HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>809 WEST MINNEOLA ROAD GIBSONVILLE, NC 27249</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  This report is of a biennial construction survey done by Bob Getchell on June 25, 2015.  This facility was first licensed as a FCH facility for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency) on February 24 , 1993. Based on this we are requiring the home to be in compliance with the 1992 and the applicable portions of the 2005 Rules 10A NCAC 13G for the Licensing of family care homes, and, the 1991 (W/1993 Revision) North Carolina State Building Code Volume 1; Section 514.1-Exception 1- Residential Care Facilities.  Deficiencies were noted which will require a new plan of correction.	C 000		
C 117	Have Current San. And Fire Safety Approvals  SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.  This Rule is not met as evidenced by: 1. Based on observation, current reports were not available at the time of the survey.  Findings include: The following reports were not available at the time of the survey: a) Sanitation report	C 117		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 136	Continued From page 1	C 136		
C 136	Bathroom-Nonskid In Tub/Showers  SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (f) Nonskid surfacing or strips must be installed in showers and bath areas.  This Rule is not met as evidenced by: 1. Based on observation, the shower floor was not maintained safe.  Findings include: The front shower has no mat or skid strips presenting a slip hazard.	C 136		
C 149	Outside Entrances/Exits-Handrails At Porches  SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails.  This Rule is not met as evidenced by: 1. Based on observation, the porch guardrails were not maintained safe.  Findings include: The front left handrail has come loose.	C 149		
C 152	Floors  10A NCAC 13G .0314 FLOORS (a) All floors in a family care home shall be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs shall not be used. (c) All floors shall be kept in good repair.	C 152		

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C 152	Continued From page 2  This Rule is not met as evidenced by: 1. Based on observation, the floor coverings were not maintained safe. This could expose all residents to trip hazards.  Findings include: a) There are runs in the hall carpet, b) The front left bedroom has a bent carpet strip that prevents the door from being closed, c) The back porch is covered with carpet that has come loose.	C 152		
C 153	Houskeeping And Furnishings-Clean, Repaired  SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes.  This Rule is not met as evidenced by: 1. Based on observation, the bedroom furnishings were not maintained in good repair.  Findings include: a) The left front bedroom has: i) a worn chest of drawers, and ii) a worn chair b) The left back bedroom has: i) a worn chest of drawers, and ii) a broken chair c) The front middle bedroom has a worn chest of drawers	C 153		
C 168	Fire Extinguishers	C 168		

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C 168	Continued From page 3  SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (a) Fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official.  This Rule is not met as evidenced by: 1. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would affect all residents by not having fire protection equipment operable for use in an emergency.  Findings include: The inspection tags on the fire extinguishers indicate that required monthly checks are not being performed per NFPA 10	C 168		
C 174	Building Equipment Maintained Safe, Operating  SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes.  This Rule is not met as evidenced by: 1. Based on observation, the baseboard heaters	C 174		

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C 174	<p>Continued From page 4</p> <p>were not maintained safe.</p> <p>Findings include: The baseboard heaters have issues in the following locations:</p> <ul style="list-style-type: none"> <li>a) Left front bedroom has a guard that has fallen down,</li> <li>b) Left back bedroom has a guard that has fallen down,</li> <li>c) Front middle bedroom baseboard heater in contact with drapes, which are heat damaged.</li> </ul> <p>2. Based on observation, the facility oxygen bottles were not stored in a safe manner.</p> <p>Findings include:</p> <ul style="list-style-type: none"> <li>a) There are oxygen bottles in the hall closet that are not secured.</li> <li>b) There is a oxygen bottle in the front left bedroom on the chest of drawers</li> </ul> <p>3. Based on observation, the electrical system was not maintained safe.</p> <p>Findings include:</p> <ul style="list-style-type: none"> <li>a) The exterior breaker panel box has an open space where a breaker has been removed.</li> <li>b) The HVAC disconnect box has a 1/2 inch hole in the bottom of the enclosure.</li> </ul> <p>4. Based on observation, the exterior building components were not maintained.</p> <p>Findings include:</p> <ul style="list-style-type: none"> <li>a) Paint is peeling on window frames</li> <li>b) Paint is peeling on fascia boards,</li> <li>c) Paint is peeling on soffits.</li> </ul> <p>5. Based on observation, the building components were not maintained operable.</p>	C 174		

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C 174	Continued From page 5  Findings include: The back left bedroom has a closet door off track.	C 174		
C 180	Building Service Equipment-Call System  SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed. (j) This Rule shall apply to new and existing family care homes.  This Rule is not met as evidenced by: 1. Based on observation, the call system was not maintained operable.  Findings include: The call system is not working.	C 180		